



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
BREATH ALCOHOL PROGRAM

**INTOX EC/IR II MAINTENANCE REPORT**

REPORT #3

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service. Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

INTOX EC/IR II SN 13051	NAME OF AGENCY Creve Coeur Police Dept.	DATE OF INSPECTION 12/25/2021
----------------------------	--	----------------------------------

LOCATION OF INSTRUMENT (STREET AND CITY) 350 N. New Ballas Rd. Creve Coeur, MO 63141	TIME OF INSPECTION 14:41 CST
---	---------------------------------

**CHECKLIST:** Place a mark in the box by each item if found to be satisfactory or is operating within established limits. (Write in observed values where determined). Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> <b>DIAGNOSTIC RECORD</b>	
<input checked="" type="checkbox"/> BLANK CHECK	<input checked="" type="checkbox"/> CO2 CHECK
<input checked="" type="checkbox"/> FC 1 TEMP	<input checked="" type="checkbox"/> FLOW CHECK
<input checked="" type="checkbox"/> SRC TEMP	<input checked="" type="checkbox"/> FCB CHECK
<input checked="" type="checkbox"/> DET TEMP	<input checked="" type="checkbox"/> CRC COMP CHECK
<input checked="" type="checkbox"/> BT TEMP	<input checked="" type="checkbox"/> CRC CAL CHECK
<input checked="" type="checkbox"/> STD 2 TEMP	<input checked="" type="checkbox"/> PRINT TEST
<input checked="" type="checkbox"/> ETH CHECK	

**BREATH ANALYZER ACCURACY STANDARDS**

<input type="checkbox"/> SIMULATOR SOLUTION	<input checked="" type="checkbox"/> COMPRESSED ETHANOL-GAS MIXTURE
<input checked="" type="checkbox"/> STANDARD SUPPLIER	INTOXIMETERS
LOT# AG027403	EXP. DATE 09/30/2022
<input type="checkbox"/> SIMULATOR TEMP (34°C ±0.2°C)	SIM. SN
	SIM. NIST EXP DATE

**CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)**

Run three tests using a standard solution. All three tests must be within +5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used.

<input checked="" type="checkbox"/> 0.10% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
<input type="checkbox"/> 0.08% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
<input type="checkbox"/> 0.04% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 = 0.101 g/210L	TEST 2 = 0.100 g/210L	TEST 3 = 0.100 g/210L
-----------------------	-----------------------	-----------------------

**INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:**

REFUSALS	0	0-.04	25	.05-.09	0	.10-.14	2	.15-.19	1	OVER .19	1
----------	---	-------	----	---------	---	---------	---	---------	---	----------	---

LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS (USE OTHER SIDE IF NECESSARY).

<b>INSPECTING OFFICER</b>	
SIGNATURE 	PRINT FULL NAME ZUCKERMAN, JONATHAN
TYPE II PERMIT NUMBER 200136	TELEPHONE NUMBER ( 314 ) 432-8000
EXPIRATION DATE 03/09/2022	

**RETURN COMPLETED REPORT TO THE:**  
Breath Alcohol Program, Missouri Department of Health and Senior Services,  
by mail, fax, or e-mail



Airgas USA LLC (BAH)  
 1500 Howard Street  
 St Louis, Mo 63103  
 PH (314)513-3100  
 FAX (314)513-3120

**Certificate of Analysis**

Customer Name  
 Exclusive Supplier  
 Intermatrix, Inc  
 2001 Gray Road  
 St Louis, Mo 63116

Test Date: 1 Oct 2020

Lot # AG027403 Model 100Card

Exp. Date: 30-Sep-2022  
 Cyl. Type: 10B  
 Component: Ethanol Nitrogen  
 Certified Concentration: 0.100 ± 2% CrAc (272 ppm) Indirect

Certification traceable to N.I.S.T. CRM and to CRM Ethanol Standards:

CRM Serial No.	Concentration	CRM Serial No.	Concentration
EB0010661	392.1 ppm	EB0010663	301.0 ppm
EB0010670	259.6 ppm	EB0010669	266.2 ppm
EB0010285	206.0 ppm	EB0010695	201.3 ppm
EB0010561	103.6 ppm	EB0010662	104.2 ppm
HR0010661	52.12 ppm	EB0010679	52.11 ppm
CRM Serial No.	Concentration	CRM Serial No.	Concentration
CC434668	606.0 ppm	0066649	100.1 ppm
CC234603	263.0 ppm	0066662	160.2 ppm

Analytical Method: NDIR

Capacity signed by Control Center  
 Date: 2020 10 02 12:22:16 -04:00  
 Location: City gas analytical certificate - analytical  
 Location: 41451254111.0000

Approved for Release: Rod Marsalk  
 Rod Marsalk

ISO 17025:2005 A2LA accredited. Certificate Number 3082.06  
 ISO 17034:2016 A2LA accredited. Certificate Number 3082.07



STATE OF MISSOURI  
DEPARTMENT OF HEALTH AND SENIOR SERVICES  
BREATH ALCOHOL PROGRAM

2

**PERMIT  
TYPE II**

**JONATHAN P ZUCKERMAN**

is hereby authorized to install and supervise operators, train instructors, inspect, calibrate, perform and service and repair, and operate the following breath analyzer(s):

**INTOX EC/IR II**

for the determination of the alcoholic content of blood from a sample of expired air. PERMITS NUMBERS BY PROGRAM NUMBER: 677.080 through 677.081, PMSMs and 608.111 through 608.112 PMSMs.

DATE 10/28/88

NUMBER 100136

EXPIRES 10/30/89

MS 647877-10-18

*[Signature]*  
HARRY W. STANLEY, JR.  
COMMISSIONER

*[Signature]*  
STATE DEPARTMENT OF HEALTH AND SENIOR SERVICES

1-81 (10/88)

